



## Safety and Risk of Harm Practice Bulletin February 2008



DHS Child Protective Workers and Case Managers provide critical analyses and recommendations about safety and risks of harm for a child. These formal assessments are tools to help assess safety and risk and which occur at key decision points throughout the life of the case, but are only one part of this assessment. Staff and their supervisors use their professional judgment and expertise to evaluate the entire situation.

This Practice Bulletin provides DHS definitions for Safety and Risk; as well as summarizes the federal expectations and provides some practice tips.

### Safety Definitions:

**Maltreatment** is child abuse or neglect as defined under State law.

**Present Danger** is immediate, significant and clearly observed maltreatment which is occurring to a child in the present **or** there is an immediate threat of maltreatment requiring immediate action to protect the child.

**Impending Danger** is a foreseeable state of danger in which family behaviors, attitudes, motives, emotions, and/or the child's physical environment pose a threat of maltreatment.

### **Safety Constructs:**

- ❑ **Threats of Maltreatment** are situations, behaviors, emotions, motives, perceptions, or capacities which can produce child maltreatment.
- ❑ **Vulnerability** is the degree to which a child cannot on her own; avoid, negate, minimize/modify the impact of present or impending danger.
- ❑ **Protective capacities** are family strengths or resources that reduce, control and or prevent threats of maltreatment. Lack of these strengths and resources (deficiencies) should be noted also.

A **Safety concern** is an immediate and impending threat which requires DHS staff's immediate attention.

A **child is safe** when there is no present or impending danger or when existing dangers are controlled by the caretaker's protective capacities.

A **child is unsafe when:**

- ❑ She is vulnerable to present or impending danger and
- ❑ The caretaker is unable to assure the child is protected or the caretaker lacks the protective capacities to do so.

A **child is conditionally safe when:**

- ❑ The child has one or more signs of present or impending danger and
- ❑ The child's vulnerability and/or protective capacities do not offset the impending danger of maltreatment but controlling safety interventions through a safety plan have been initiated and based on these interventions, the child remains in the home.

### Safety Expectations:

DHS staff members provide ongoing assessment and address a child's safety and risk concerns wherever the child lives: residential treatment facilities, their parents' home, guardians' home, or foster parents' home.



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### **A Safety Assessment:**

- ❑ Evaluates whether a child is safe, unsafe, or can be made conditionally safe.
- ❑ Is a decision-making and documentation process that evaluates present and impending danger by evaluating the safety constructs of threats of maltreatment, child vulnerability, and protective capacities.
- ❑ **Informal safety assessments** is an on-going process that occurs whenever there is case contact throughout the "life of the case".
- ❑ **Formal safety assessment** documentation occurs at key decision points in the life of the "life of the case":
  - Initial visit of any and all Child Abuse Assessments.
  - Completion of Protective Assessment if the home was determined to be Conditionally Safe at the conclusion of the Initial Safety Assessment or if family is referred for DHS services.
  - Prior to initiation of unsupervised visits.
  - Prior to family reunification.
  - Prior to case closure.
  - Whenever circumstances suggest the child may be in an unsafe situation.
  - Is documented on form 470-4133

### **A Safety Plan:**

- ❑ Is a written, specific, formal, concrete, time-limited strategy for controlling threats of maltreatment or supplementing protective capacities.
- ❑ Is employed immediately when a family's protective capacities are insufficient to manage immediate threats of maltreatment.
- ❑ Manages safety threats in the least restrictive manner to allow interventions to proceed.
- ❑ Includes family involvement in both the development and implementation of the plan.

- ❑ States the threat of maltreatment, who will do what, when, for how long and how this will be monitored. It also includes a back-up plan.
- ❑ Is closely monitored, documented, and updated as situations change.
- ❑ Is documented on form 470-4461.

### **Risks of Harm Definitions:**

**Risks of Harm** are issues from contributing factors, underlying conditions, or underlying needs that are responsible for safety issues.

- ❑ **Underlying conditions** are those factors that are part of, within the family group. These would include domestic violence, substance abuse, mental illness, physical illness, unrealistic expectations, and impulsivity.
- ❑ **Contributing factors** are those situations that put external pressure on the family group. Examples are poverty, language barriers, cultural barriers, lack of social supports or neighborhood issues such as crime and violence.
- ❑ **Underlying needs** are those needs which are being met by the behavior expression associated with safety and risk concerns.
- ❑ **Risk factors** produce a possibility/likelihood that a child will suffer maltreatment in the future.
- ❑ **Risk factor** identification helps determines the focus of the change process and the issues that will impact successful intervention for a case.
- ❑ **When risk factors are identified they can:**
  - Point the direction to the most successful interventions.
  - Provide direction in achieving identified outcomes
  - Be monitored and worked on so they do not escalate into safety threats.

### **Risk Expectations**

### **Family Risk Assessment:**

- ❑ The Family Risk Assessment is a tool which evaluates personal, physical, environmental, and



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factors in families which are associated with repeat maltreatment. This tool in combination with clinical judgment helps to focus the needs of the family.

- ❑ This tool determines risk related to abuse and neglect and assigns a score of low, moderate, or high risk for this family in each category.
- ❑ This tool is a factor in determining when a case is accepted for service by DHS
- ❑ This formal tool is documented on form 470-4132.
- ❑ Formal Risk Assessment and Re-Assessment documentation occurs:
  - By completion of all Child Abuse Assessments
  - Every 90 days on open service cases.
  - Prior to case closure.

### Visitation as it Relates to Safety and Risk:

- ❑ Children in care should visit their parents soon after placement and often to maintain family ties and work on the issues blocking reunification.
- ❑ Safety and risk must be evaluated before and during these visits. Keeping children safe is our first priority.
- ❑ Monitoring visits is a key to evaluating safety and risk.
- ❑ Informal safety and risk evaluation is done to assure a child's safety related to their foster parents, foster family, and other foster children in the foster home. This is done when there is any collateral or face-to-face visit with the parents or child.
- ❑ Residential placements, foster parents, pre-adoptive parents, and non-licensed relatives providing care to a child in DHS custody should be evaluated informally for safety and risk issues related to the child. They should receive assistance as needed, but the primary concern is the safety of the child and DHS will act to ensure the child's safety.
- ❑ Activities which may decrease safety issues are:
  - Closer monitoring of the placement.

- Placing fewer children in the home.
- Providing services to address potential problems or existing problems.
- Finding a more appropriate placement.

### Federal Expectations

"Risk assessment and Safety Management" are the terms used in Item 4 of the CFSR onsite review tool. The federal language is somewhat different but the main goal is to keep children safe. The expectation is that staff "must make concerted efforts to assess and address the risk and safety concerns relating to the children in their own homes or while in foster care". Safety assessment refers to the determination of whether a child is in a safe environment. A safe environment is one in which there are no threats that pose a danger or, if there are threats, there is a responsible adult in a caregiving role who demonstrates sufficient capacity to protect the child. Risk is defined as the likelihood that a child will be maltreated in the future. *Risk and safety assessments* must be formally or informally conducted at "life of the case" key decision points, which include:

- ❑ An initial assessment of the safety and risk to a child in foster care or any children in the family remaining in the home at first contact and at the conclusion of the investigation and case transfer.
- ❑ Develop, continually monitor, and update the safety plan with the family for addressing identified safety issues. Safety plans must:
  - Address safety threats and how those will be managed by the caregiver,
  - Document the caregiver capacity to implement the safety plan and report safety issues to the caseworker, and
  - Include family involvement in development and implementation of the plan.
- ❑ Thorough and ongoing assessment of safety and risk to the child in foster care and/or any children in the family remaining in the home.
- ❑ Documentation must occur at least when:



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- There are new allegations of abuse or neglect,
- There are changing family conditions,
- There is initiation or changes to visitation,
- Reunification is considered and during trial home visits, and/or
- Before case closure.

#### Practice Tips:

- ❑ Don't confuse filling out any form with the ongoing responsibility for social workers to diligently assess safety of a child and risk of harm. Safety involves critical analysis and good judgment decisions. Use the safety constructs and tools to help you make decisions. When any safety or risk needs are identified, appropriate action must be taken.
  - ❑ Ensure correct determinations are made on intake information to avoid screening out allegations that meet the criteria of abuse.
  - ❑ Timely intakes, timely processing of allegations and timely report assignments are critical.
  - ❑ Ensure all allegations of maltreatment for the family are formally reported or formally assessed.
  - ❑ Ensure correct determinations are made regarding substantiation and are adequately supported by the evidence.
  - ❑ Complete safety assessment and safety plans as noted above:
  - ❑ Document all formal safety and risk assessments.
  - ❑ Assessing and responding appropriately to safety decision-making must examine the presence and interaction of three crucial variables, including threats of serious harm, a family's capacity to protect their children from harm and each child's unique vulnerability.<sup>1</sup> The crucial issue in decision-making is not only immediate danger of serious harm but also prospective safety - will the child be safe in the foreseeable future. Assessment must focus on:
    - ❑ Underlying conditions and contributing factors compromising safety threats
    - ❑ Protective capacities and practice strategies to increase protective capacity
    - ❑ Strategies to decrease child vulnerability, and
    - ❑ A plan and implementation of supports and/or mitigating conditions that can address foreseeable risk of harm.
  - ❑ Develop visitation plans for children in foster care that consider safety first.
  - ❑ Development of placement matching and ongoing monitoring of a placement for safety is critical for safety.
  - ❑ Assessments and activities that support a safe placement include:
    - ☐ Thorough foster family assessment and background checks.
    - ☐ Needs assessment of the child.
    - ☐ Assessment of other children placed in the home for compatibility with this child.
    - ☐ Matching the child's needs with the substitute family's/facility's abilities.
    - ☐ Preparing the child and family for placement.
    - ☐ Providing adequate support to the child, family, and substitute caregivers.
    - ☐ Developing crisis plans that address predictable behaviors or patterns of behavior that threaten or destabilize the placement. And, assessing and addressing the foster parents' needs in the case plan.
    - ☐ Recognizing relationship stress early in the placement and resolving problems.
    - ☐ Visiting the child and continuing to monitor and inquire about safety.
    - ☐ Asking the child at each visit if they feel safe. Explore issues presented.
    - ☐ Following safe case closure criteria.
- Premature closing of a case when risk factors are unchanged is not productive practice and often contributes to repeat maltreatment.

<sup>1</sup> T.D. Morton, B. Slovit, Essential Safety Contracts in Child Maltreatment Cases [2003]